

OFFICIAL RESPONSES TO VENDOR QUESTIONS RFP-2017-BDAS-03-CRISIS

No.	Question	Answer
1.	 Section 3.2, page 13, Question 7. Can the awarded CARAS vendor keep the exiting RAPS name/crisis line marketing material in place? 	Continued use of an existing RAP's name and/or marketing materials will be determined as part of the transition planning process. The continued use of any marketing materials will be determined in consultation with BDAS's Health Promotion Advisor.
2.	Do we include anticipated revenue through billable services in our proposal?	This contract is inclusive of all services, additional billing for the services under this contract is prohibited.
3.	1. Section 3.3.1.1. states that the Contractor shall have at least one MLADC or LADC with an LCS. Can this be a contractual relationship or does the Contractor need to hire a full time or part time person?	This may be a contractual relationship.
4.	 Section 3.3.1.4. states, "no licensed supervisor shall supervise more than eight (8) unlicensed staff unless the Department has approved an alternative supervision plan". Does this mean that an MLADC or LADC with an LCS can only supervise up to 8 CRSWs? How does a contractor identify and hire/contractor with enough MLADCs or LADCs with an LCS to meet the need? 	Yes, unless otherwise approved by the Department. Respondents who intend to request an alternative supervision plan should include this alternative plan in their proposal.



5.	1. If a CRSW is only allowed to carry a caseload of 50 clients, as stated in Sect 3.3.1.5., the Contractor will need to hire multiple CRSWs, which would then require multiple MLADCs or LADCs with an LCS. Is this a correct interpretation?	Yes; however, clients receiving CRM only are not counted towards this maximum.
6.	 Section 4.6, Will the contractor and/or subcontractors be able to receive additional reimbursements from BDAS and/or other third party insurances for eligible Fee for Service and Recovery Support Services activities? For example, for evaluations, eligible recovery support services, counseling services, interim service delivery, and continuous recovery monitoring, etc.) 	No.
7.	 Section 4.2, Funds available are significantly less money than previously allocated for the crisis line and RAPs. Publicly available records indicate that one contract for RAP is \$1.2 million, and one Crisis Phone Services is approx. \$600,000 for FY 2017. This RFP is bundling these aforementioned services at \$1.1-\$1.2 million or less annually. Is there a rationale behind this decision? Why is the funding in 2020 so small in comparison to 2018 and 2019? 	 The amounts shown in the RFP were provided in error. Vendors should submit their proposed budget for services. Funding for State Fiscal Year 2020 is only a partial year, running from July 1, 2019 through December 31, 2019, six months (6); 2018 is for eleven (11) months; 2019 is for the full twelve (12) months.



8.	Section 4.6, For RAP, can BDAS provide service utilization and cost details by region so that applicants can better identify budget constraints and requirements by region? For example, number of services and type provided by month, by region.	This is not currently available for all 13 regions or broken down by region; however, for the 11 regions served by Granite Pathways, through the end of April, there have been an average of: • 269 calls per month; • 135 client encounters per month; • 38 enrollment per month; • 24 screenings per month.
9.	Section 7.1.4, Does just one copy of the audits need to be included as part of the original cost proposal, no additional copies?	Refer to Sections 7.1.4.1 and 7.1.4.3 for the number of copies required. Also, refer to Section 7.2.3.